

Thoracic Aortic Endografts: Opportunities

NHLBI Symposium 2011

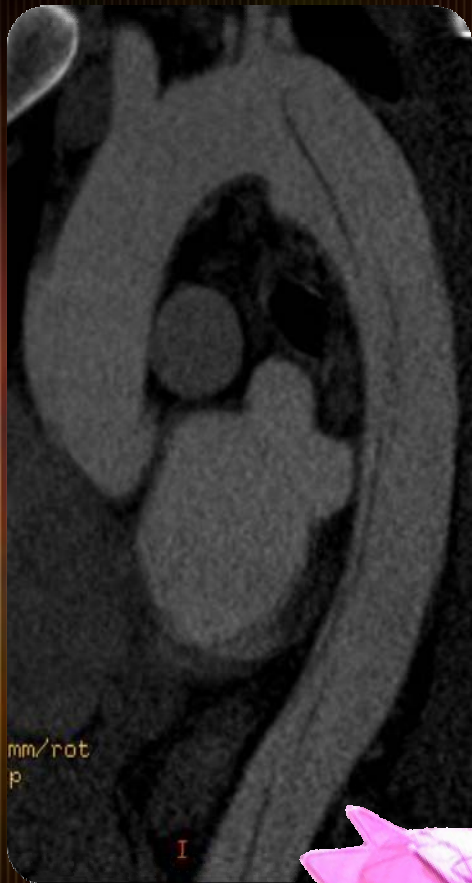
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Type B Aortic Dissection

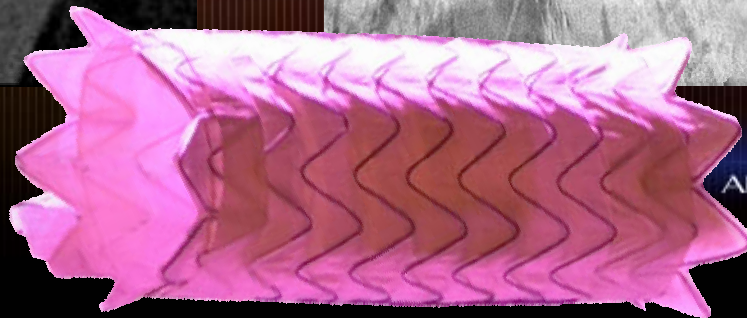
Acute non-complicated



Acute with malperfusion

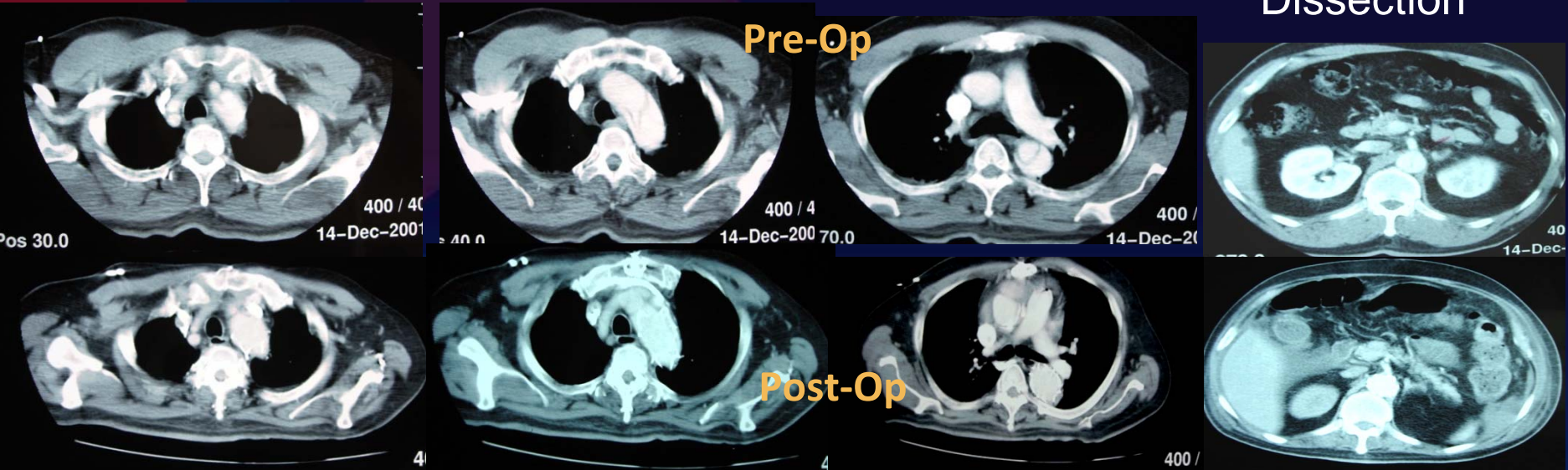


Chronic with aneurysm



Aortic Evolution

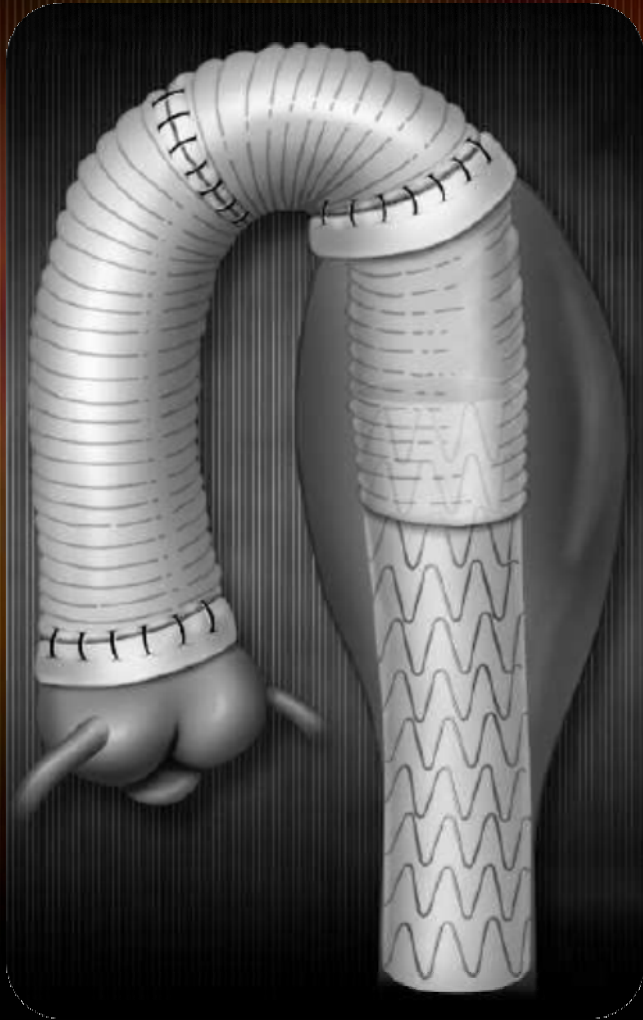
Acute
Dissection



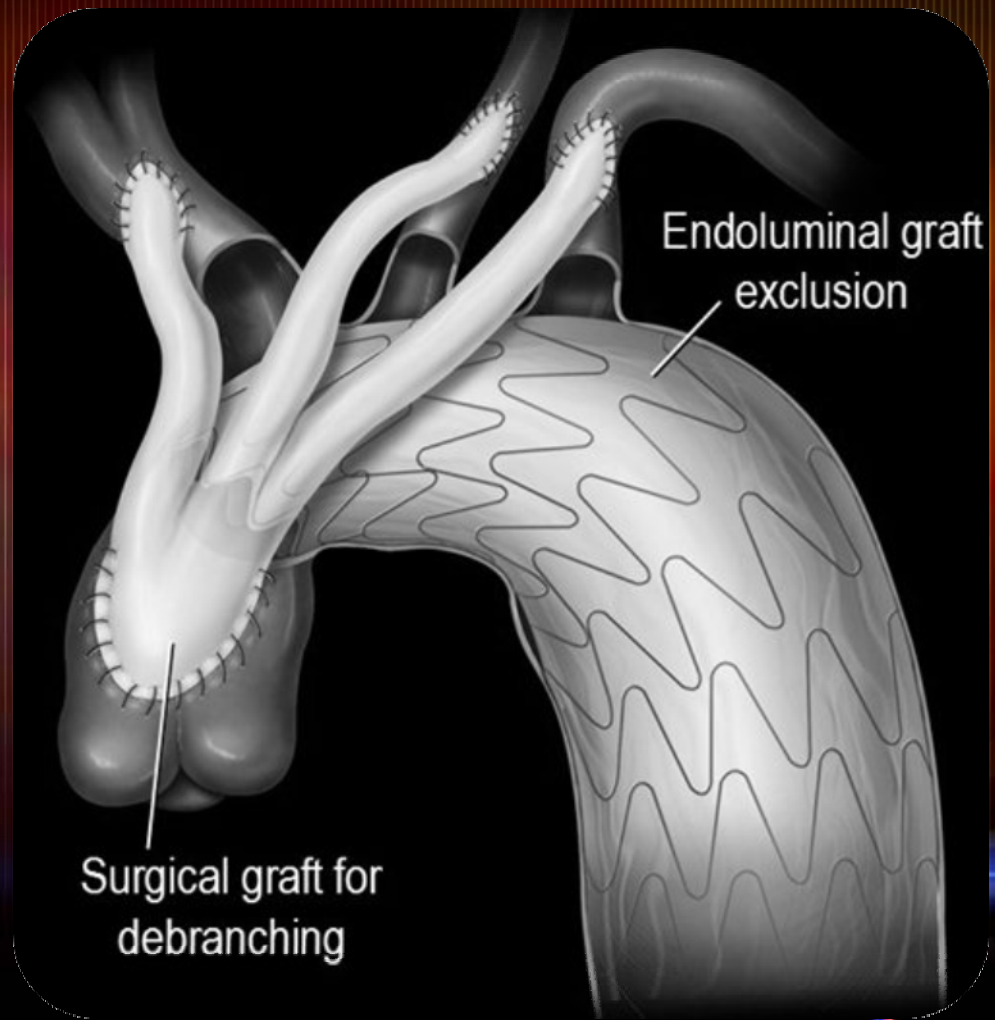
In acute dissections, covering the proximal tear results in shrinkage of the false lumen, occurring within 6 mos.

New Hybrid Classification System

Hybrid Type I



Hybrid Type II



Meta-Analysis Hybrid Arch Comparison with Total Arch Replacement Series

STUDY	PATIENTS	ELECTIVE	OVERALL 30 DAY MORTALITY	OVERALL PERM/TEMP NEUROLOGIC DYSFUNCTION	RESPIRATORY FAILURE TRACHEOSTOMY
KOUCHOUKOS NT ET AL 2008 ONESTAGE/DHCA	51	NP	IN HOSPITAL 3.9%	0 STROKE// 1 PARAPLEGIA	4%
OGINO ET AL [64] 2008 DHCA & SACP	431	74%	4.0%	3.3% / 10.6%	14.1%
SUNDT ET AL [65] 2008 DHCA&RCP/SACP	347	67%	8.9%	8.4% / NP	38%
KAZUI ET AL[66] 2007 DHCA&SACP	420	71%	9.3%	3.2% / 4.7%	NP
KOULLIAS 2010 PRESENT STUDY	463	61%	8.3%	4.4 %	<1%
SUBGROUP DHCA&SACP	324	60.8%	6.9%	4.1%	<1%
SUBGROUP OFF PUMP	139	62.5%	10.2%	4.8 %	<1%



Aortic Valve and Arch Involvement

Embolic
Protection

***“ULTIMATE
Full Metal Jacket”***

**Branched
Aortic
Stent
Grafts**

Percutaneous Aortic Valve

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